Public Notice Related to Creation of a New Service, Changes to Rates Paid and Method for Authorizing Services by the Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals for Services Delivered by Private Developmental Disability Organizations

November 30, 2012

The Rhode Island Executive Office of Health and Human Services is filing an amendment to its Global Consumer Choice Section 1115 waiver on behalf of the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH) to add a new service and to change some of the rates paid to Private Developmental Disability Organizations (DDOs) effective with dates of service beginning January 1, 2013.

In addition, BHDDH is updating the service packages available to participants and will begin to convert participants from their current service package to their new service package that is informed by an assessment of the participant using the Supports Intensity Scale (SIS), a national evaluation tool that was developed by the American Association on Intellectual and Developmental Disabilities (AAIDD).

## New Service

BHDDH is proposing to add a new waiver service effective January 1, 2013 as defined below.

"Access to Overnight Shared Supports" means the availability of direct support and assistance on an on-call basis for participants who live independently in the community in a setting where direct support can be easily shared among a group of participants, such as an apartment building. The service is intended to be shared among participants to help them achieve and/or maintain the outcomes of increased independence, productivity, and inclusion in the community, as outlined in his/her person-centered plan. Access to Overnight Shared Supports does not supplant nonpaid natural supports. This service is ONLY offered to participants who live independently in a residential setting not licensed by BHDDH where overnight supports are neither authorized nor funded.

## Rate Changes

Effective January 1, 2013, BHDDH is updating the rates paid for the services listed below. In each case, except Community-Based Day Program Service, the rate change is a result of changes in staff-to-participant staffing ratios and not due to any other changes in the rate model.

1. For Community Residence Support Service (T2033/U6) and Non-Congregant Residential Support Service (T2016/U6), the staffing ratio change is as follows:

Through 12/31/12:

1 staff to 4 clients during client sleep hours

1 staff to 3 clients during client awake hours

As of 1/1/13:

1 staff to 4 clients during client sleep hours

1 staff to 4 clients during client awake hours

2. For Community Residence Support Service (T2033/UA) and Non-Congregant Residential Support Service (T2016/UA), the staffing ratio hours remain unchanged

(1 staff to 2 clients during client sleep hours; 1 staff to 1.5 clients during client awake hours). The change being made is related to the composition of staffing for this service.

Total hours are distributed as 80% for Direct Service Professionals Through 12/31/12:

and 20% for Registered Nurses

As of 1/1/13:

Total hours are distributed as 90% for Direct Service Professionals

and 10% for Registered Nurses

3. For Center-Based Day Program Service (T2021/UA and T2021/TG), the following staffing ratio changes are being made:

Through 12/31/12:

1 staff to 1 client

As of 1/1/13:

1 staff to 3 clients

4. For Community-Based Day Program Services, the rates will be changed for all modifiers within this service. The assumption in the rate model related to building costs was removed since this service is delivered in the community. Additionally, the following staffing ratio changes are being made:

1 staff to 10 clients T2021/U5/U1 Through 12/31/12:

As of 1/1/13:

1 staff to 5 clients

T2021/U6/U1 Through 12/31/12: 1 staff to 8 clients

As of 1/1/13:

1 staff to 5 clients

T2021/U7/U1 Through 12/31/12:

1 staff to 5 clients

As of 1/1/13:

1 staff to 2 clients

Additionally, as part of changes to its service packages, BHDDH has changed the number of rates for many services. Where there had been seven modifiers for rates in the past, effective January 1, 2013, this will be reduced to five modifiers. The rate modifiers that are being eliminated include the following:

- 1. Support Coordination: T2022/U8 and T2022/TF
- 2. Support Facilitation: T2022/U8/U2 and T2022/TF/U2
- 3. Community Residence Support Service: T2033/U8 and T2033/TF
- 4. Non-Congregant Residential Support Service: T2016/U8 and T2016/TF
- 5. Shared Living Arrangement Service: T2033/U8/U1 and T2033/TF/U1
- 6. Center-Based Day Program Service: T2021/U8 and T2021/TF
- 7. Community-Based Day Program Service: T2021/U8/U1 and T2021/TF/U1
- 8. Home-Based Day Program Service: T2020/U8 and T2020/TF

In each situation above, the rates that had been in place for U8 are being converted to the corresponding U7 rate. For rates that had a TF modifier, these are being converted to the corresponding UA rate.

The rates and rate models set forth in this public notice are subject to approval by the Centers for Medicare and Medicaid. BHDDH will continue to monitor utilization against authorized services in an effort to conform to the legislative appropriation.

### Updates to Service Packages

In a Public Notice released June 2, 2011, BHDDH announced its intent to change the method in which it assigns resources to participants. Specifically, the Notice stated that in State Fiscal Year (SFY) 2012, participants would receive authorizations which would be considered "interim" resource allocations that were based, in large part, on prior year authorizations. Final resource allocations would be developed for each SIS level after sufficient analysis was completed on a representative sample of assessments completed.

To date, SIS assessments have been completed on more than 1,800 of the approximate 3,600 active participants. A review by clinical teams was conducted on a sample of the first 1,000 assessments in an effort to validate the assignment of participants to SIS levels and to make recommendations to BHDDH with respect to the amount and type of services that should be included in a service package.

BHDDH received the recommendations from the clinical validation teams and included them as part of its decision-making process to make updates to service packages. BHDDH will begin to transition participants to the new service packages beginning with participant anniversaries effective February 1, 2013. A participant will not convert to his/her new service package until (1) a SIS assessment has been completed for the participant, and (2) a new anniversary year begins for the participant. As a result, the conversion to the new service packages will be staged for current participants beginning February 1, 2013 and ending March 31, 2014. Any participant that is newly eligible to receive services will automatically be placed in one of the new service packages.

There are 20 service packages in all. They are composed of five tiers of service packages within four residential statuses. The residential statuses include: Residential Supports, Shared Living Arrangement, Living with Family, and Independent Community Living. The matrix that accompanies this Public Notice outlines the services in each service package that are used to develop the resource allocation available to participants assigned to each tier. Participants may also choose to purchase other services available in the waiver as substitutes for these services, as long as the participant does not exceed his/her total resource allocation.

This is the draft waiver amendment that will be submitted to CMS. A written copy may be requested from Monica Pacheco at mpacheco@bhddh.ri.gov or at 462-1320. It can also be found on the BHDDH website at www.bhddh.ri.gov. Written comments should be addressed to Monica Pacheco and must be received no later than December 17<sup>th</sup>, 2012 at 4:00 pm. Comments received will be posted to the BHDDH website for viewing.

A public meeting has been scheduled related to this amendment. The meeting will take place on Friday, December 7, 2012 from 2-4pm at the Arnold Conference Center at Eleanor Slater Hospital, 111 Howard Avenue, Cranston, RI.

# Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals Service Packages by Residential Status and by Tier

## Residential Supports

## Shared Living

		Service	e Package Tier	e Tier				Servic	Service Package Tier	e Tier	
Services	A	В	C	Q	図	Services	A	<b>m</b>	Ö	Ω	
Support Coordination or Support Facilitation (if self direct)  Months/Year	ation (if s 12	elf direct) 12	12	12	12	Support Coordination or Support Facilitation (if self direct)  Months/Year	ation (if s 12	self direct	12	12	
Residential Service Days/Year	365	365	365	365	365	Residential Service Days/Year	365	365	365	365	
Day Program Activity Hours/Week	30	30	30	30	30	Day Program Activity Hours/Week	30	30	30	30	
equivalent to these staffing ratios: in Center-Based Program in Community-Based Program	1:10	1:8	1:5	1:3	1::	in Community-Based Program	1:10	1:8	1:5	113	
in Home-Based Program	1:10	1:8	1:5	1:2	1:1	in Home-Based Program	1:10	1:8	1:5	1:2	
Transportation Trips/Year	514	514	514	514	514	Transportation Trips/Year	514	514	514	514	
Professional Services while at Day Program Hours/Year	ram   12	12	12	9	9	Professional Services while at Day Program Hours/Year	ram   12	12	12	65	
						Respite Hours/Year	200	200	200	300	

The services listed above represent services used to assign total resources to each service package tier. In addition to these services, participants assigned to a tier for Residential Supports or Shared Living may purchase the following services within their service package as substitutes for the Day Program Activity services listed: Job Development or Assessment, Prevocational Training, Supported Employment.

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Participants who choose to self-direct may choose to purchase: Supports Brokerage and Self-Directed Goods or Services.

# Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals Service Packages by Residential Status and by Tier

## Living with Family

# Independent Community Living

		Service	Service Package Tier	e Tier				Servic	Service Package Tier	e Tier	
Services	¥	В	၁	Q	国	Services	¥	В	C	Q	闰
Support Coordination or Support Facilitation (if self direct)  Months/Year	tation (if $s$	self direct)	12	12	12	Support Coordination or Support Facilitation (if self direct)  Months/Year 12 12	tation (if so	elf direct) 12	12	12	12
Community-Based Supports Hours/Week	ν,	10	20	30	30	Community-Based Supports Hours/Week	10	20	30	. 40	40
Day Program Hours/Week	30	30	30	30	30	Day Program Hours/Week	30	30	30	30	30
equivalent to these staffing ratios: in Center-Based Program in Community-Based Program	1:10	1:8	1:5	1:3	111	equivalent to these statring ranos: in Center-Based Program in Community-Based Program	1:10	1:8	1:5	1:3	1:1
in Home-Based Program	1:10	1:8	1:5	1:2	::	in Home-Based Program	1:10	<u>~</u>	1:5	1:2	1:1
Transportation Trips/Year	514	514	514	514	514	Transportation Trips/Year	514	514	514	514	514
Professional Services while at Day Program Hours/Year	$gram$ $\begin{vmatrix} gram \\ 12 \end{vmatrix}$	12	12	. 65	9	Professional Services while at Day Program Hours/Year	gram 12	12	12	99	99
						Access to Overnight Shared Supports* Days/Year	365	365	365	365	365
						* Participant must reside in a setting that enables shared support to receive this service.	t enables	shared sur	port to re	ceive this	service.

The services listed above represent services used to assign total resources to each service package tier. In addition to these services, participants assigned to a tier for Job Development or Assessment, Prevocational Training, Supported Employment, Natural Supports Training, Respite, Attendant Care, and Homemaker Services. Living with Family or Independent Community Living may purchase the following services within their service package as substitutes for other services listed:

Participants who choose to self-direct may choose to purchase: Supports Brokerage and Self-Directed Goods or Services.

Rhode Island BHDDH

Service Category	BHDDH Service Title	Tier	HCPCS / Modifier	Billing Unit	Q1 and Q2: BHDDH Adopted Rate (as of 7/1/12)	Q3: BHDDH Adopted Rate (as of 1/1/13)
	Support Coordination (participants with FV/day agency combo)	any	T2022 L6	per month	\$50.66	\$50.66
	Support Coordination	A	T2022 U5	per month	\$99.58	\$99.58
	Support Coordination	В	T2022 U6	per month	\$119.95	\$119.95
<u></u>	Support Coordination	C	T2022 U7	per month	\$141.10	\$141.10
	Support Coordination	ပ	T2022 U8	per month	\$141.10	see U7 rate
	Support Coordination	D	T2022 TF	per month	\$141.10	see UA rate
Case Management		D	T2022 UA	per month	\$202.63	\$202.63
Case ividuagement	Support Coordination	Е	T2022 TG	per month	\$202.63	\$202.63
	Support Facilitation	A	T2022 U5 U2	per month	\$43.92	\$43.92
	Support Facilitation	В	T2022 U6 U2	per month	\$43.92	\$43.92
	Support Facilitation	C	T2022 U7 U2	per month	\$87.84	\$87.84
	Support Facilitation	C	T2022 U8 U2	per month	\$87.84	see U7 rate
	Support Facilitation	Ω	T2022 TF U2	per month	\$133.19	see UA rate
	Support Facilitation	D	T2022 UA U2	per month	\$176.65	\$176.65
	Support Facilitation	田	T2022 TG U2	per month	\$176.65	\$176.65
	Community Residence Supports	A	T2033 U5	per diem	\$115.36	\$115.36
	Community Residence Supports	В	T2033 U6	per diem	\$132.36	\$115.36
	Community Residence Supports	Э	T2033 U7	per diem	\$158.08	\$158.08
	Community Residence Supports	ပ	T2033 U8	per diem	\$178.96	see U7 rate
	Community Residence Supports	D	T2033 TF	per diem	\$220.07	see UA rate
	Community Residence Supports	D	T2033 UA	per diem	\$280.55	\$250.74
	Community Residence Supports	E	T2033 TG	per diem	\$280.91	\$280.91
	Non-congregant Residential Supports	А	T2016 U5	per diem	\$115.36	\$115.36
	Non-congregant Residential Supports	В	T2016 U6	per diem	\$132.36	\$115.36
Pesidential	Non-congregant Residential Supports	C	T2016 U7	per diem	\$158.08	\$158.08
Habilitation	Non-congregant Residential Supports	S	T2016 U8	per diem	\$178.96	see U7 rate
Tabilitation	Non-congregant Residential Supports	D	T2016 TF	per diem	\$220.07	see UA rate
	Non-congregant Residential Supports	D	T2016 UA	per diem	\$280.55	\$250.74
	Non-congregant Residential Supports	田	T2016 TG	per diem	\$280.91	\$280.91
	Shared Living Arrangements	Ą	T2033 U5 + U1	per diem	\$68.97	\$68.97
	Shared Living Arrangements	В	T2033 U6 + U1	per diem	\$84.18	\$84.18
	Shared Living Arrangements	ပ	T2033 U7 + U1	per diem	\$84.18	\$106.86
	Shared Living Arrangements	၁	T2033 U8 + U1	per diem	\$106.86	see U7 rate
	Shared Living Arrangements		T2033 TF + UI	per diem	\$106.86	see UA rate
	Shared Living Arrangements	Ω	T2033 UA + UI	per diem	\$128.15	\$128.15
	Shared Living Arrangements	ш	T2033 TG + U1	per diem	\$128.15	\$128.15
	Community-Based Supports (standard)	1:1	T2017	15 minutes	\$5.93	\$5.93
	Community-Based Support Prof. Staff	1:1	T2017 UD	15 minutes	\$12.68	\$12.68
Independent	Natural Supports Training (standard)	1:1	T2013	per hour	\$29.18	\$29.18
Living or Family	Natural Supports Training Prof. Staff	1:1	T2013 UD	per hour	\$46.11	\$46.11
Supports	Respite Care	All	T1005	15 minutes	\$4.77	\$4.77
	Respite Care (overnight)	All	T1005 NS	15 minutes	\$3.42	\$3.42
	Respite Care	All	S9125	per diem	\$171.72	\$171.72

BHDDH Adopted Rates Effective in the First, Second and Third Quarters of State Fiscal Year 2013

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Service Category	BHDDH Service Title	Tier	HCPCS / Modifier	Billing Unit	Q1 and Q2: BHDDH Adopted Rate (as of 7/1/12)	2: opted 1/12)	Q3: BHDDH Adopted Rate (as of 1/1/13)
Ind. Living Only	Access to Overnight Shared Supports	All	To Be Determined	per diem	not available	ble	\$17.55
Transmostation	Day Activity Transportation	A,B,C	T2003	per trip	\$8.92	F	\$8.92
ı ratisportation	Day Activity Transportation	D,E	T2003 UA or TG	per trip	\$13.77		\$13.77
	Job Development or Assessment	1:1	T2025 UD	per hour	\$53.91		\$53.91
	Prevocational Training	1:1	T2015	per hour	\$23.44		\$23.44
Drayocational	Prevocational Training	1:2	T2015 UN	per hour	\$12.12		\$12.12
Training	Prevocational Training	1:3	T2015 UP	per hour	\$8.42		\$8.42
Smm	Prevocational Training	1:4	T2015 UQ	per hour	\$6.59		\$6.59
	Prevocational Training	1:5	T2015 UR	per hour	\$5.48		\$5.48
	Prevocational Training	1:6	T2015 US	per hour	\$4.76		\$4.76
Supported Empl	Supported Employment	1:1	T2019	15 minutes	\$6.17		\$6.17
	Day Program (center-based)	A	T2021 U5	15 minutes	\$1.05		\$1.05
	Day Program (center-based)	В	T2021 U6	15 minutes	\$1.18		\$1.18
	Day Program (center-based)	C	T2021 U7	15 minutes	\$1.58		\$1.58
	Day Program (center-based)	၁	T2021 U8	15 minutes	\$2.30		see U7 rate
	Day Program (center-based)	Q	T2021 TF	15 minutes	\$3.19		see UA rate
	Day Program (center-based)	Д	T2021 UA	15 minutes	\$5.86		\$2.30
	Day Program (center-based)	Œ	T2021 TG	15 minutes	\$5.86		\$2.30
	Day Program (community-based)	Α	T2021 US U1	15 minutes	\$1.05		\$1.28
	Day Program (community-based)	В	T2021 U6 U1	15 minutes	\$1.18		\$1.28
	Day Program (community-based)	ပ	T2021 U7 U1	15 minutes	\$1.58		\$2.89
Day Program	Day Program (community-based)	ပ	T2021 U8 U1	15 minutes	\$2.30	1	see U7 rate
	Day Program (community-based)	Ω	T2021 TF U1	15 minutes	\$3.19		see UA rate
_	Day Program (community-based)	Ω	T2021 UA U1	15 minutes	\$5.86		\$5.56
	Day Program (community-based)	田	T2021 TG U1	15 minutes	\$5.86		\$5.56
	Day Program (home-based)	Α	T2020 U5	per diem	\$21.70		\$21.70
	Day Program (home-based)	М	T2020 U6	per diem	\$25.55		\$25.55
	Day Program (home-based)	ပ	T2020 U7	per diem	\$37.24		\$37.24
	Day Program (home-based)	ပ	T2020 U8	per diem	\$55.16		see U7 rate
	Day Program (home-based)	Q	T2020 TF	per diem	\$76.37		see UA rate
	Day Program (home-based)	Q	T2020 UA	per diem	\$143.22		\$76.37
	Day Program (home-based)	田	T2020 TG	per diem	\$143.22		\$143.22
Home Health	Attendant Care	All	S5125	15 minutes	defan	t to Me	default to Medicaid rate
Provider Services	Homemaker Services	All	S5130	15 minutes	defan	t to Me	default to Medicaid rate
Self-Directed	Supports Brokerage, Self Directed	All	T2041	15 minutes	varies	-	varies
Services	Self-Directed Goods or Services	AII	T2025 U2	varies	varies		varies
	PERS, install and testing	All	S5160	per service	varie	s, prior	varies, prior auth req'd
	PERS, service	All	S5161	per service	varie	s, prior	varies, prior auth req'd
Other	PERS, purchase only	All	S5162	per service	varie	s, prior	varies, prior auth req'd
	Home Modifications	All	S5165	per service	varie	s, prior	varies, prior auth req'd
	Assistive Technology	All	T5999	per service	varie	s, prior	varies, prior auth req'd

## Community Residence Supports Adopted Rate as of January 1, 2013

	Unit of Service HCPCS	Day T2033 U5	Day T2033 U6	Day T2033 U7
enefits	Wages - Direct Staff Hourly Wage - Annual Wage - Supervisor Hourly Wage (Direct Service) - Annual Wage	\$11.30 \$23,504 \$16.95 \$35,256	\$11.30 \$23,504 \$16.95 \$35,256	\$11-30 \$23,504 \$16.95 \$35,256
Wages and Benefits	Employee Related Expenses (Direct Staff) - Shown as a percentage of wages Employee Related Expenses (Supervisor) - Shown as a percentage of wages	30.0%	30.0%	30.0%
	Total Hourly Cost, Direct Staff Total Hourly Cost, Supervisor	\$14.69 \$21.36	\$14.69 \$21.36	\$14.69 \$21.36
Non Face-to-Face Client Time	Direct Staff Productivity Assumptions Total Hours - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.10 0.07 0.10 7.73 1.03 \$15.20	8.00 0.10 0.07 0.10 7.73 1.03 \$15.20	8.00 0.10 0.10 0.10 7.70 1.04 \$15.26
Staffing	- Weekly Hours per Home, Direct Staff - Weekly Hours per Home, Supervisor - Weekly Staff Hours per Client Weekly Staff Cost per Client	138 20 39.50 \$631.29	138 20 39.50 \$631.29	206 20 56.47 \$892.29
Trans. Costs	Capital Costs - Purchase Price of 6-Passenger Lift Van - Salvage Value - Useful Life (Miles) Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35
	Operating Costs  - Amount per mile  - Number of Miles per Week (Home Vehicle)  - Number of Miles per Week per Client  Weekly Transportation Cost per Client	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 \$10.78
Program Exp. Staffing	- Licensed Staff Wage - Licensed Staff ERE - Weekly Hours Weekly Program-Related Staffing Cost per Client	\$27.52 26.0% \$4.0 \$34.68	\$27.52 26.0% 4.0 \$34.68	\$27.52 26.0% 4.0 <b>\$34.68</b>
Progra m Exp. Other	- Program Expense Per Day Weekly Other Program Expense Cost	\$4.00 <b>\$28.00</b>	\$4.00 \$28.00	\$4.00 \$28.00
Admin.	- Administration Expense Percent  Weekly Administrative Cost per Client	10.0% \$704.74 \$70.47	10.0% \$704.74 \$ <b>70.4</b> 7	10.0% \$965.74 \$96.57
·	Total Weekly Cost per Client Daily Rate (w/o Absences)	\$775.22 \$110.75	\$775.22 \$110.75	\$1,062.31 \$151.76
,	Absence Rate .  Daily Rate  Annual Amount (365 days)	4.0% \$115.36 \$42,106.40	4.0% \$115.36 \$42,106.40	4.0% \$158.08 \$57,699.20

## Community Residence Supports Adopted Rate as of January 1, 2013

	Unit of Service	Day	Day
	HCPCS	T2033 UA	T2033 TG
enefits	Wages  - Direct Staff Hourly Wage  - Annual Wage  - Supervisor Hourly Wage (Direct Service)  - Annual Wage	\$12.92 \$26,878	\$11.30 \$23,504 \$16.95 \$35,256
Wages and Benefits	Employee Related Expenses (Direct Staff) - Shown as a percentage of wages Employee Related Expenses (Supervisor) - Shown as a percentage of wages	29.6%	30.0%
	Total Hourly Cost, Direct Staff Total Hourly Cost, Supervisor	\$16.75	\$14.69 \$21.36
Non Face-to-Face Client Time	Direct Staff Productivity Assumptions Total Hours - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.10 0.20 0.12 7.58 1.06 \$17.67	8.00 0.12 0.20 0.15 7.53 1.06 \$15.61
Staffing	- Weekly Hours per Home, Direct Staff  - Weekly Hours per Home, Supervisor  - Weekly Staff Hours per Client  Weekly Staff Cost per Client	331 20 87.67 \$1,461.12	374 20 98.60 \$1,567.59
Trans. Costs	Capital Costs - Purchase Price of 6-Passenger Lift Van - Salvage Value - Useful Life (Miles) Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35
Trai	Operating Costs  - Amount per mile  - Number of Miles per Week (Home Vehicle)  - Number of Miles per Week per Client  Weekly Trans. Cost per Client	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 \$10.78
Other Program-Related Costs	<ul> <li>Licensed Staff Wage, Nursing</li> <li>Licensed Staff ERE</li> <li>Weekly Hours</li> <li>Licensed Staff Wage, Psychologist</li> <li>Licensed Staff ERE</li> <li>Weekly Hours</li> <li>PRC Reporting Costs</li> <li>Weekly Other Program-Related Costs per Client</li> </ul>	\$0.00	\$27.52 26.0% 4.0 \$27.52 26.0% 8.0 \$5.70 \$109.73
Progra m Exp. Other	Weekly Other Program Expense Cost	\$4.00 \$28.00	\$4.00 \$28.00
Admin.	- Administration Expense Percent - Total Weekly Cost per Client Weekly Administrative Cost per Client	10.0% \$1,499.90 <b>\$149.99</b>	10:0% \$1,716.09 \$1 <b>71.6</b> 1
	Total Weekly Cost per Client Daily Rate (w/o Absences)	\$1,649.88 \$235.70	\$1,887.70 \$269.67
	Absence Rate Daily Rate Annual Amount (365 days)	6.0% <b>\$250.74</b> \$91,520.10	4.0% \$280.91 \$102,532.15

Note: Rate Model for T2033 UA is blended between Direct Care Worker and Nurse Rate, 90%/10%

## Non-congregant Residence Supports Adopted Rate as of January 1, 2013

	Unit of Service HCPCS	Day T2016 U5	Day T2016 U6	Day T2016 U7
enefits	Wages - Direct Staff Hourly Wage - Annual Wage - Supervisor Hourly Wage (Direct Service) - Annual Wage	\$11.30 \$23,504 \$16.95 \$35,256	\$11.30 \$23,504 \$16.95 \$35,256	\$11.30 \$23,504 \$16.95 \$35,256
Wages and Benefits	Employee Related Expenses (Direct Staff) - Shown as a percentage of wages Employee Related Expenses (Supervisor) - Shown as a percentage of wages	30.0%	30.0%	30.0%
	Total Hourly Cost, Direct Staff Total Hourly Cost, Supervisor	\$14.69 \$21.36	\$14.69 \$21.36	\$14.69 \$21.36
Non Face-to-Face Client Time	Direct Staff Productivity Assumptions Total Hours - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.10 0.07 0.10 7.73 1.03 \$15.20	8.00 0.10 0.07 0.10 7.73 1.03 \$15.20	8.00 0,10 0.10 0.10 7.70 1.04 \$15.26
Staffing	<ul> <li>Weekly Hours per Home, Direct Staff</li> <li>Weekly Hours per Home, Supervisor</li> <li>Weekly Staff Hours per Client</li> <li>Weekly Staff Cost per Client</li> </ul>	138 20 39.50 \$631.29	138 20 39.50 \$631.29	206 20 56.47 \$892.29
Trans. Costs	Capital Costs - Purchase Price of 6-Passenger Lift Van - Salvage Value - Useful Life (Miles) Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% \$100,000 \$0.35	\$44,000 20% 100,000 \$0.35
Tra	Operating Costs - Amount per mile - Number of Miles per Week (Home Vehicle) - Number of Miles per Week per Client Weekly Transportation Cost per Client	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 \$10.78
Program Exp. Staffing	- Licensed Staff Wage - Licensed Staff ERE - Weekly Hours  Weekly Program-Related Staffing Cost per Client	\$27.52 26.0% 4.0 \$34.68	\$27.52 26.0% 4.0 \$34.68	\$27.52 26.0% 4.0 \$34.68
Progra m Exp. Other	- Program Expense Per Day Weekly Other Program Expense Cost	\$4.00 \$28.00	\$4.00 \$28.00	\$4.00 \$28.00
Admin.	- Administration Expense Percent  Weekly Administrative Cost per Client	10.0% \$704.74 \$70.47	10.0% \$704.74 \$ <b>70.4</b> 7	10.0% \$965.74 <b>\$96.5</b> 7
	Total Weekly Cost per Client Daily Rate (w/o Absences)	\$775.22 \$110.75	\$775.22 \$110.75	\$1,062.31 \$151.76
	Absence Rate  Daily Rate  Annual Amount (365 days)	\$115.36 \$42,106.40	\$115.36 \$42,106.40	4.0% <b>\$158.08</b> \$57,699.20

## Non-congregant Residence Supports Adopted Rate as of January 1, 2013

	Unit of Service HCPCS	Day T2016 UA	Day T2016 TG
enefits	Wages - Direct Staff Hourly Wage - Annual Wage - Supervisor Hourly Wage (Direct Service) - Annual Wage	\$12.92 \$26,878	\$11.30 \$23,504 \$16.95 \$35,256
Wages and Benefits	Employee Related Expenses (Direct Staff) - Shown as a percentage of wages Employee Related Expenses (Supervisor) - Shown as a percentage of wages	29.6%	30.0%
	Total Hourly Cost, Direct Staff Total Hourly Cost, Supervisor	\$16.75	\$14.69 \$21.36
Non Face-to-Face Client Time	Direct Staff Productivity Assumptions Total Hours - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.10 0.20 0.12 .7.58 1.06 \$17.67	8.00 0.12 0.20 0.15 7.53 1.06 \$15.61
Staffing	- Weekly Hours per Home, Direct Staff - Weekly Hours per Home, Supervisor - Weekly Staff Hours per Client Weekly Staff Cost per Client	331 220 87.67 \$1,461.12	374 20 98.60 \$1,567.59
Trans. Costs	Capital Costs - Purchase Price of 6-Passenger Lift Van - Salvage Value - Useful Life (Miles) Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35
Trai	Operating Costs  - Amount per mile  - Number of Miles per Week (Home Vehicle)  - Number of Miles per Week per Client  Weekly Trans. Cost per Client	\$0.51 200.0 50.0 \$10.78	\$0.51 200.0 50.0 * \$10.78
Other Program-Related Costs	- Licensed Staff Wage, Nursing - Licensed Staff ERE - Weekly Hours - Licensed Staff Wage, Psychologist - Licensed Staff ERE - Weekly Hours - PRC Reporting Costs Weekly Other Program-Related Costs per Client	\$0.00	\$27.52 26.0% 4.0 \$27.52 26.0% 8.0 \$5.70 \$109.73
Progra m Exp. Other	Weekly Other Program Expense Cost	\$4.00 \$28.00	\$4.00 \$28.00
Admin.	- Administration Expense Percent - Total Weekly Cost per Client Weekly Administrative Cost per Client	10.0% \$1,499.90 \$1 <b>49.99</b>	10.0% \$1,716.09 \$171.61
	Total Weekly Cost per Client Daily Rate (w/o Absences)	\$1,649.88 \$235.70	\$1,887.70 \$269.67
	Absence Rate  Daily Rate  Annual Amount (365 days)	\$250.74 \$91,520.10	4.0% \$280.91 \$102,532.15

Note: Rate Model for T2016 UA is blended between Direct Care Worker and Nurse Rate, 90%/10%

## Access to Overnight Shared Supports Adopted Rate as of January 1, 2013

	Unit of Service	Per Diem
	HCPCS	TBD
	Staff-to-Client Ratio	1:8
	Wages	학학 <u>생활</u> '등학 <b>가.O</b>
	- Direct Staff Hourly Wage	\$11.30
1	- Annual Wage	\$23,504
	- Supervisor Hourly Wage (Direct Service)	\$16.95
ιχ	- Annual Wage	\$35,256
efit	- Minual Wago	Ψ33,230
Wages and Benefits	Employee Related Expenses (Direct Staff)	
g	- Annual Health Insurance Cost	0.0%
l æ	- Shown as a percentage of wages	30.0%
) ခရိ	Employee Related Expenses (Supervisor)	0.000
⊗	- Annual Health Insurance Cost	0.0%
	- Shown as a percentage of wages	26.0%
	Total Hourly Cost, Direct Staff	\$14.69
	Total Hourly Cost, Supervisor	\$21.36
2	Direct Staff Productivity Assumptions	
l F	Total Hours	8.00
Non Face-to-Face Client Time	- Off Schedule Time	0.18
ace	- Attending Training	0.12
Ci g	Average on-site time; "Billable Hours"	7.70
ž	Productivity Adjustment	1.04
	Hourly Staff Cost After Productivity Adjustment	\$15.26
l .ig		
Supervisio	Supervisor Staff Assumption	
l adr	- Daily Supervision	0.25
S	Hourly Supervision Cost	\$0.69
4		
Admin.	- Administration Expense Percent	10.0%
Ad	- Total Hourly Cost	\$15.96
	Hourly Administrative Cost	\$1.60
	Total Hayely Data	\$17.55
	Total Hourly Rate  Daily Rate (8 hours per pight)	\$17.33 \$140.40
	Daily Rate (8 hours per night)	\$17.55
	Per Client Per Diem Rate (assume 1:8 staff for this service)	911.99

November 30, 2012

## Day Program Services, Center-Based Adopted Rate as of January 1, 2013

	Unit of Service HCPCS	15 Minute T2021 U5	15 Minute T2021 U6	15 Minute T2021 U7	15 Minute T2021 UA
	Staff-to-Client Ratio	1:10	1.8	1:5	T2021 TG
Wages and Benefits	Wages - Direct Staff Hourly Wage - Annual Wage	\$11.30 \$23,504	\$11.30 \$23,504	\$11 <u>.30</u> \$23,504	\$11.30 \$23,504
/ages and	Employee Related Expenses - Shown as a percentage of wages	30,0%	30.0%	30.0%	30.0%
	Total Hourly Staff Cost (wages + ERE)	\$14.69	\$14.69	\$14.69	\$14.69
	Productivity Assumptions Total Hours - Set Up and Shut Down Time - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.50 7 0.10 0.20 0.12 7.08 1.13 \$16.60	8.00 0.50 0.10 0.20 10.12 7.08 1.13 \$16.60	8.00 0.50 0.10 0.20 0.12 7.08 1.13 \$16.60	8.00 0.50 0.10 0.20 7.08 1.13 \$16.60
	Attendance Adjustment - Attendance Days - Program Operation Days - Ratio  Hourly Staff Cost After Attendance Adjustment	232 250 0.928 \$17.89	232 250 0.928 \$17.89	232 250 0.928 \$17.89	232 250 0.928 \$17.89
Staffing Ratio	- Group Size - Ratio of staff to client Hourly Compensation per Client	10.0 0.10 \$1.79	8.0 0.13 \$2.24	5.0 0.20 \$3.58	0.33 \$5.96
Supervision	- Supervisor Hourly Wage - Supervisor ERE - Weekly Supervision per Client Group - Daily Supervision Cost per Client Hourly Supervision Cost per Client	\$16.95 26.0% 3.00 \$12.81 \$0.18	\$16.95 26.0% 2.50 \$10.68 \$0.19	\$16.95 26.0% 2.00 \$8.54 \$0.24	\$16.95 26.0% 1-75 \$7.47 \$0.35
Trans. Costs	Capital Costs  - Purchase Price of 6-Passenger Lift Van  - Salvage Value  - Useful Life (Miles)  Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35
Trans	Operating Costs  - Amount per mile  - Number of Miles per Day (Program Vehicle)  - Number of Miles per Day per Client  Hourly Trans. Cost per Client	\$0.51 -50.0 5.0 \$0.61	\$0.51 40.0 5.0 <b>\$0.61</b>	\$0.51 25:0 5.0 \$0.61	\$0.51 15.0 5.0 <b>\$0.61</b>
Capital	- Square Footage per client - Cost per Square Foot - Number of Days in Service Total Square Footage / Individual / Day Hourly Capital Cost per Client	137.0 \$12.50 232 \$7.38 \$1.04	137.0 \$12.50 232 \$7.38 \$1.04	137.0 \$12.50 232 \$7.38 \$1.04	137.0 \$12.50 232 \$7.38 \$1.04
Program Exp.	- Program Expense Percent Total Hourly Cost Hourly Program Expense Cost	\$3.62 \$0.18	5.0% \$4.08 \$0.20	5.0% \$5.47 <b>\$0.2</b> 7	5.0% \$7.97 <b>\$0.40</b>
Admin.	- Administration Expense Percent Total Hourly Cost Hourly Administrative Cost per Client	\$3.80 \$0.38	10.0% \$4.28 <b>\$0.43</b>	10.0% \$5.74 <b>\$0.5</b> 7	10.0% \$8.36 <b>\$0.84</b>
	Total Staff Hour Rate Rate, per 15 Minutes, per Client Rate, per 15 Minutes, all Clients in Group	\$4.18 <b>\$1.05</b> \$10.50	\$4.71 <b>\$1.18</b> \$9.44	\$6.32 <b>\$1.58</b> \$7.90	\$9.20 <b>\$2.30</b> \$6.90

## Day Program Services, Community-Based Adopted Rate as of January 1, 2013

	Unit of Service HCPCS	15 Minute T2021 U5 U1	15 Minute T2021 U7 U1	15 Minute T2021 UA U1
	Staff-to-Client Ratio	T2021 U6 U1 1:5	1:2	T2021 TG U1
Benefits	Wages - Direct Staff Hourly Wage - Annual Wage	\$11.30 \$23,504	\$11.30 \$23,504	\$11.30 \$23,504
Wages and Benefits	Employee Related Expenses - Shown as a percentage of wages	30.0%	30.0%	30.0%
	Total Hourly Staff Cost (wages + ERE)	\$14.69	\$14.69	\$14.69
	Productivity Assumptions Total Hours - Set Up and Shut Down Time - Off Schedule Time - Support Coordination Meetings - Attending Training Average on-site time; "Billable Hours" Productivity Adjustment Hourly Staff Cost After Productivity Adjustment	8.00 0.50 0.10 0.20 0.12 7.08 1.13 \$16.60	8.00 	8.00 0.50 0.10 0.20 0.12 7.08 1.13 \$16.60
	Attendance Adjustment - Attendance Days - Program Operation Days - Ratio Hourly Staff Cost After Attendance Adjustment	232 250 0.928 \$17.89	232 250 0.928 \$17.89	232 250 0.928 \$17.89
Staffing Ratio	- Group Size - Ratio of staff to client Hourly Compensation per Client	5.0 0.20 \$3.58	2.0 0.50 <b>\$8.94</b>	1.0 1.00 <b>\$17.89</b>
Supervision	- Supervisor Hourly Wage - Supervisor ERE - Weekly Supervision per Client Group - Daily Supervision Cost per Client Hourly Supervision Cost per Client	\$16.95 26.0% 2.00 \$8.54 \$0.24	\$16.95 26.0% 1.50 \$6.41 \$0.45	\$16.95 26.0% 1.25 \$5.34 \$0.75
Trans. Costs	Capital Cosis  - Purchase Price of 6-Passenger Lift Van  - Salvage Value  - Useful Life (Miles)  Capital Cost per Mile	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35	\$44,000 20% 100,000 \$0.35
Tra	Operating Costs  - Amount per mile  - Number of Miles per Day (Program Vehicle)  - Number of Miles per Day per Client  Hourly Trans. Cost per Client	\$0.51 25.0 5.0 \$0.61	\$0.51 10.0 5.0 <b>\$0.61</b>	\$0.51 5.0 5.0 \$0.61
Program Exp.	- Program Expense Percent Total Hourly Cost Hourly Program Expense Cost	5.0% \$4.43 \$0.22	\$10.00 \$10.50	5.0% \$19.25 <b>\$0.96</b>
Admin.	- Administration Expense Percent Total Hourly Cost Hourly Administrative Cost per Client	10.0% \$4.65 <b>\$0.46</b>	10.0% \$10.50 <b>\$1.05</b>	10.0% \$20.21 \$2.02
	Total Staff Hour Rate Rate, per 15 Minutes, per Client Rate, per 15 Minutes, all Clients in Group Translated into a Daily Amount Per Person Translated into a Daily Amount, All Clients	\$5.11 \$1.28 \$6.40 \$30.72 \$153.60	\$11.56 <b>\$2.89</b> \$5.78 \$69.36 \$138.72	\$22.23 <b>\$5.56</b> \$5.56 \$133.44 \$133,44